

VERBATIM PROCEEDINGS
DEPARTMENT OF PUBLIC HEALTH

CONNECTICUT HEALTH INFORMATION
TECHNOLOGY AND EXCHANGE
MARK RAYMOND, CHAIRPERSON

FEBRUARY 4, 2014

101 EAST RIVER DRIVE
EAST HARTFORD, CONNECTICUT

POST REPORTING SERVICE
HAMDEN, CT (800) 262-4102

RE: CT HEALTH INFORMATION TECHNOLOGY & EXCHANGE
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1 . . .Verbatim proceedings of a meeting in
2 the matter of Connecticut Health Information Technology
3 and Exchange, held at 101 East River Drive, East Hartford,
4 Connecticut on February 4, 2014 at 4:38 P.M.

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9 CHAIRMAN MARK RAYMOND: I will now call the
10 HITE/CT Board of Directors meeting to order and thank you
11 all for joining us. The first item on the agenda is
12 approval of our meeting minutes from the 1/7/14 meeting,
13 and I will note one correction from that in that the date
14 reflects January 7, 2013 and it should say January 7, 2014
15 as the header of the minutes. Hi, this is Mark, who just
16 joined?

17 DR. RON BUCKMAN: Ron Buckman.

18 CHAIRMAN RAYMOND: Ron, great, thanks for
19 joining. We're just getting started. So given that
20 correction to the minutes do I -- are there any other
21 corrections or notes people would like to discuss
22 regarding the minutes?

23 MR. BRUCE CHUDWICK: Mark, the schedule of
24 meetings on the last page, February 4, 2014.

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1 CHAIRMAN RAYMOND: One more correction on
2 the last page, schedule of meetings should note February
3 4, 2014. Given those corrections do I have a motion to
4 approve the minutes?

5 MS. VANESSA KAPRAL: Motion to approve.

6 CHAIRMAN RAYMOND: Was that Vanessa?

7 MS. KAPRAL: Yes.

8 CHAIRMAN RAYMOND: Thank you. A second
9 from Dan?

10 DR. BUCKMAN: Ron.

11 CHAIRMAN RAYMOND: Ron, thank you. All in
12 favor signify with an Aye.

13 VOICES: Aye.

14 CHAIRMAN RAYMOND: Any opposed? Any
15 abstain? Motion passes, thank you. The next item on the
16 agenda is the HITE/CT Board business and the item that we
17 have scheduled there is the Treasurer's report. So I will
18 ask Chris Kraus to give the report for us today, so Chris.

19 MS. CHRIS KRAUS: Okay, I just sent them
20 out this afternoon as our books were just reconciled for
21 the end of the month of January. So I'm not sure if
22 everybody read them yet but they have been adjusted -- all
23 our financials have been adjusted to reflect the terms of
24 the settlement with Axway so you might notice the numbers

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1 look somewhat different. If you have any questions please
2 e-mail me and I can send them to the accountant for you.
3 These are still draft financials until our audit is
4 finalized which should be the end of February, beginning
5 of March.

6 Our total income as of January 31st is
7 \$1,046, 404.68. Our total expenses to date are
8 \$874,222.35, and that's on the revenue and expense page.
9 On the balance sheet we have in our bank account
10 \$181,779.50. Our total fixed assets -- excuse me, our
11 total assets are \$1,942,589.90. Our total liabilities are
12 \$9,596.17 and our net income as of January 31st is
13 \$172,182.33. On the cash flow document if you go to the
14 second page --

15 MR. DAN CARMODY: Hey Chris --

16 MS. KRAUS: Yes.

17 MR. CARMODY: -- this is Dan.

18 MS. KRAUS: Hi.

19 MR. CARMODY: How did we come up the
20 software development cost, is that just the purchase price
21 and is that what we set the value of, you know, us getting
22 out of the contract or was that the actual -- this is
23 what we think the fair market value was and how is that
24 assessed?

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1 MS. KRAUS: So are you on the balance
2 sheet, the software development --

3 MR. CARMODY: I was on the balance sheet,
4 that's right.

5 MS. KRAUS: What I can do is I can go back
6 and look at all the numbers and I can get back to you on
7 that.

8 MR. CARMODY: Okay. And do you have a
9 depreciation cost in here? Is there a time -- and I'd
10 also want to know what is the timeframe for the assets to
11 be depreciated over? I mean, are we using a three year or
12 a five year or -- you know?

13 MS. KRAUS: Okay, I'll follow up on that
14 one. Okay, any other questions on either the balance
15 sheet or the revenue and expenses? Okay, the costs on the
16 cash flow document for January of 2014 are \$25,533.93.
17 This was a three paycheck month so that's why the cost for
18 salaries is a little bit higher. It all averages out.

19 MR. CARMODY: So Chris, this is Dan again.

20 MS. KRAUS: Yes.

21 MR. CARMODY: So are we expecting that our
22 run rate -- if we project this out what is our run rate
23 going to be? And I think what we need to do is -- is the
24 run rate going to be \$25,000 a month as it stands right

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1 now that we're projecting?

2 MS. KRAUS: What I'll do is I'm going to
3 work on all the finances this week Dan so I can answer
4 that question better when I take a look at it, okay?

5 MR. CARMODY: And maybe I should -- do we
6 have any other money to draw down on from the grant or was
7 that million dollars that we had back in December, is that
8 it or is there still some additional money?

9 MS. KRAUS: We don't get any more income
10 but we have the \$181,000 in the bank.

11 MR. CARMODY: So the grant has been now
12 fully expended to us --

13 MS. KRAUS: Yes.

14 MR. CARMODY: -- and we have no additional
15 revenue coming in and the \$180 is what we have and that's
16 what we're going to draw down essentially.

17 MS. KRAUS: Yes, that's correct.

18 CHAIRMAN RAYMOND: And just to be clear,
19 under the terms of the grant those funds must be expended
20 unless they're related to closeout expenditures by March
21 15th.

22 MR. CARMODY: So that \$180,000 has to be
23 utilized completely by March?

24 CHAIRMAN RAYMOND: Unless it's related to,

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1 you know, any additional closeout activity. So final
2 accounting, grant accounting, that kind of work, that's
3 correct.

4 MR. CARMODY: Okay.

5 CHAIRMAN RAYMOND: And if those funds are
6 not -- in terms of the grant if those funds are not used
7 or allocated to those purposes, they must be returned to
8 the Department of Public Health.

9 MR. CARMODY: Okay, so does that put us in
10 a position as we're sitting here in February that we have
11 two months and then we're going to close that -- basically
12 then what happens or is that part of the conversation of
13 today?

14 CHAIRMAN RAYMOND: Yeah, that's part of the
15 subsequent conversation.

16 MR. CARMODY: Then I will hold all
17 questions.

18 CHAIRMAN RAYMOND: But you have accurately
19 depicted the situation.

20 MR. CARMODY: Okay.

21 MS. KRAUS: And as I said, since I just
22 sent this out this afternoon if you take a look and have
23 any questions I can send them to the accountants and let
24 you know what the answers are.

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1 MR. CARMODY: Okay, thank you.

2 MS. KRAUS: You're welcome.

3 CHAIRMAN RAYMOND: So are there any other
4 questions about either the balance sheet, the revenue and
5 expenses or the cash flow? Not hearing any do I hear a
6 motion to approve the Treasurer's report?

7 MR. CARMODY: So moved -- Dan.

8 CHAIRMAN RAYMOND: Okay Dan Carmody, so
9 moved.

10 MR. STEVEN THORNQUIST: I'll second.

11 CHAIRMAN RAYMOND: Second by Steven
12 Thornquist. All those in favor of accepting the Treasurer
13 report signify with an Aye.

14 VOICES: Aye.

15 CHAIRMAN RAYMOND: Any opposed? Any
16 abstain? The motion passed. Our next item on the agenda
17 is a report of the HITE/CT agency business and at this
18 point I will ask Lou Matteo to give us an update, and Lou
19 you'll probably have to come over here for folks on the
20 phone, about where we are with our project progress
21 related to the provider directory and the EMPI.

22 For those who weren't in attendance at the
23 last meeting, Lou is the technical project lead consultant
24 for HITE/CT to help implement the provider directory and

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1 EMPI pieces of our program. Lou.

2 MR. LOU MATTEO: Thanks Mark. I'll provide
3 a traditional update of the hardware and software of the
4 project. From the hardware perspective, a virtual machine
5 which is basically the hardware that's going to be able to
6 run the EMPI and the provider directory has been created
7 by the IT group in BEST. We're working right now on
8 configuring secure access for the vendor so they can go in
9 actually load the application out and we can begin the
10 testing phase. We're hoping to have that access granted in
11 the next couple of days and they can start the
12 installation by the end of the week.

13 From a software perspective, the provider
14 directory, we have two files, one created by DSS and one
15 created by DPH of providers that we're going to run
16 through the provider directory once it's installed. The
17 first piece of the installation requires the vendor to run
18 the files through an analyzer. Basically this makes sure
19 all the required fields are there, the formats of the
20 field are correct for example the date, month/month,
21 date/date, year/year, things like that. Traditionally
22 this is a painstaking process and it sometimes takes
23 weeks. The files were generated so accurately that within
24 two days the vendor came back and said the files are ready

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1 to be loaded. So thank you to the folks at DSS and DPH
2 for generating very accurate files.

3 And the enterprise master patient index,
4 the vendor is going to provide some test files so we can
5 execute them through the EMPI once it's installed on our
6 servers here and then in future phases we'll get -- we'll
7 collect some patient files from different areas and run
8 them through the application. So basically to summarize,
9 the hardware and accessibility should be completed this
10 week. The application should be installed next week and
11 that will allow us three to four weeks to do the final
12 configuration and test done.

13 MS. BARBARA PARKS-WOLF: Quick question.
14 Just in terms of populating, what proportion of the
15 providers or patients are we getting for this particular
16 product? I don't remember.

17 CHAIRMAN RAYMOND: The question for those
18 on the phone was what proportion of the providers or --

19 MS. PARKS-WOLF: Are we getting all the
20 providers in Connecticut or just a proportion of them
21 because we once talked about how were just going to sort
22 of -- get some and scale up.

23 MR. MATTEO: Correct.

24 CHAIRMAN RAYMOND: Yeah, so the -- what's

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1 the size of the file you currently have?

2 MR. MATTEO: The size of the file is about
3 10,000 providers.

4 DR. THORNQUIST: In the State of
5 Connecticut?

6 MR. MATTEO: Well, they're active -- those
7 are active.

8 DR. THORNQUIST: Right.

9 MR. MATTEO: That are licensed in either
10 DPH or DSS.

11 DR. THORNQUIST: Okay, that's more than
12 M.D.'s then.

13 MR. MATTEO: I'm sorry?

14 DR. THORNQUIST: That's more than M.D.'s
15 then.

16 MR. MATTEO: No, that was just M.D.'s.

17 DR. THORNQUIST: In the State of
18 Connecticut? It seems like a big -- alright.

19 MS. PARKS-WOLF: So only M.D.'s in the
20 provider file?

21 MR. MATTEO: That's what we're starting
22 with.

23 MS. PARKS-WOLF: And the client file is all
24 the Medicaid or some --

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1 CHAIRMAN RAYMOND: I'd say that we -- the
2 question was is the client file all of Medicaid. Right
3 now we don't have a defined use case for the EMPI so we're
4 working on that. We're having discussion with Social
5 Services in terms of the ability -- you know, a data
6 sharing agreement to be able to share the data to put it
7 into there and then what that would look like.

8 MS. PARKS-WOLF: So we're building --

9 CHAIRMAN RAYMOND: The capability --

10 MS. PARKS-WOLF: -- the capability but
11 we're not populating it yet unlike the provider one, which
12 we are populating.

13 CHAIRMAN RAYMOND: Correct.

14 MS. PARKS-WOLF: Okay, thank you.

15 MR. MATTEO: Other questions?

16 CHAIRMAN RAYMOND: Okay.

17 DR. THORNQUIST: How are you identifying
18 the patients you're putting in?

19 MR. MATTEO: I'm sorry?

20 DR. THORNQUIST: How are you identifying
21 the patients since it's only a --

22 MR. MATTEO: The vendor NextGate is going
23 to provide us some patient files to use.

24 DR. THORNQUIST: Alright.

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1 MS. PARKS-WOLF: Just test files.

2 DR. THORNQUIST: So those are dummy
3 patients.

4 MR. MATTEO: Absolutely.

5 DR. THORNQUIST: And when we go to upload
6 ours -- when we go live when will that be? I mean, how
7 are we going to determine -- are we going to go with the
8 full set of DSS patients?

9 CHAIRMAN RAYMOND: Again, we have to
10 discuss what the -- under that sort of sustainability
11 umbrella, you know, what activities that we'll have beyond
12 March and what the abilities are to utilize those
13 capabilities. So there is a layout of what should be
14 specified in the EMPI but it's not about -- and
15 fortunately with the Medicaid population there's a
16 Medicaid number that we can use for that initial set of
17 people. But the idea is that there's not a -- we're not
18 creating a unique identifiable, the purpose of an EMPI is
19 to use multiple different sources to and glean who the
20 identified individual is.

21 Okay, any other questions for Lou on our
22 sort of short-term activities? Okay.

23 MR. MATTEO: Thank you.

24 MS. KRAUS: I have one other --

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1 CHAIRMAN RAYMOND: Yes okay, Chris.

2 MS. KRAUS: -- just want to let you know
3 that I sent out the annual report and everyone should have
4 a copy. That was due February 1st.

5 CHAIRMAN RAYMOND: Do we have an action on
6 that?

7 MS. KRAUS: No, there's no action.

8 CHAIRMAN RAYMOND: Okay. So the next item
9 listed under agency business is legal and counsel
10 contracts. At this point our legal and counsel contracts
11 will be expiring and we see the need for additional
12 representation at a minimum through the end of the fiscal
13 year and if not longer. These contracts are only used by
14 -- on an as-needed basis, so if we don't have the need to
15 use them or don't use them by the hour we don't get billed
16 for them.

17 But I think we need the Board approval to
18 continue with the contracts for our accountant firm and
19 our legal representation firms. So we'll probably
20 consider the motions separately just to make sure that
21 we've got -- we acted appropriately. So first I'd like to
22 obtain a motion for the extension of our Shipman & Goodwin
23 contract for legal services to the end of the current --

24 MS. KRAUS: They're both the same, they're

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1 good till February 28th.

2 CHAIRMAN RAYMOND: -- they're -- but we're
3 going to extend them --

4 MS. KRAUS: Right.

5 CHAIRMAN RAYMOND: -- to the end of the
6 fiscal year.

7 MS. KRAUS: Can we do them for another year
8 Bruce?

9 MR. CHUDWICK: I think the Board can do
10 that, yes, if you want to.

11 CHAIRMAN RAYMOND: Yes, so I would
12 entertain a motion for a one-year extension to our legal
13 contract with Shipman & Goodwin, a one-year extension. Do
14 I hear a motion for that?

15 DR. THORNQUIST: I'll move it, can we
16 please discuss it?

17 CHAIRMAN RAYMOND: We have a motion from
18 Steven Thornquist to extend our legal contract for one
19 calendar year. Do I hear a second?

20 DR. BUCKMAN: Second.

21 CHAIRMAN RAYMOND: That was Ron I believe?

22 DR. BUCKMAN: Yes.

23 CHAIRMAN RAYMOND: Okay, any discussion on
24 that matter?

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1 DR. THORNQUIST: So the contract doesn't
2 cost us anything unless we invoke them correct?

3 CHAIRMAN RAYMOND: The question -- the
4 statement is that the contract does not cost anything
5 unless we invoke them and the answer to that is yes,
6 that's correct.

7 DR. THORNQUIST: And if we need to invoke
8 them from what do we pay them?

9 MS. KRAUS: The rates are stipulated.

10 CHAIRMAN RAYMOND: No, he's saying from
11 what funds.

12 MS. KRAUS: Oh, oh, where are we getting --

13 CHAIRMAN RAYMOND: Yeah, so between the --
14 the end of our current contract are the grant funds -- or
15 the end of February and our grant funds in March, it would
16 be from the grant funds. And after that, again, we'll
17 have to defer that conversation to the sustainability
18 discussion. But we can't -- for those items actually that
19 are related to financial reviews or document reviews
20 associated with the grant closeout, those would be
21 applicable expenses for which to have both legal and
22 financial support for.

23 So there's the possibility for using some
24 of those grant funds beyond the date if it's strictly tied

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1 to grant closeout processing. Is there any other
2 discussion of that motion? Okay hearing none, all in
3 favor of extending our Shipman & Goodwin contract for one
4 year please signify with an Aye.

5 VOICES: Aye.

6 CHAIRMAN RAYMOND: Any opposed, any
7 abstain? Okay, the motion passes. I assume that that's
8 someone of the phone who had shifted from one call to
9 another is that correct? Has anyone joined the call?

10 MR. RODERICK BREMBY: Yes, that is correct
11 Mark. I shifted from the land-based phone to cellular.

12 CHAIRMAN RAYMOND: Okay, thank you
13 Commissioner.

14 MS. ELLEN ANDREWS: I joined, Ellen
15 Andrews.

16 CHAIRMAN RAYMOND: Oh perfect, thank you
17 Ellen. In the same token I'd like to -- we have the need
18 to -- this isn't our accounting this is our --

19 MS. KRAUS: No, that's Updike, Kelly &
20 Spellacy.

21 CHAIRMAN RAYMOND: Okay, so we have our
22 legal representation from Updike, Kelly & Spellacy that,
23 you know, at this point we don't have anything that we
24 would plan on using them for, but in the event that we do

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1 I'd also like to extend that contract for an additional
2 year as well. So I would entertain a motion to extend our
3 Updike, Kelly, Spellacy contract for 12 months. Do I hear
4 a motion to that effect?

5 DR. THORNQUIST: Alright, I'll move it too.

6 CHAIRMAN RAYMOND: Thank you Steven. Dr.
7 Thornquist has forwarded the motion, do I hear a second?

8 MS. KAPRAL: Second.

9 CHAIRMAN RAYMOND: And who was that?

10 MS. KAPRAL: Vanessa.

11 CHAIRMAN RAYMOND: Vanessa, thank you. Any
12 discussion of that?

13 DR. THORNQUIST: Now, these guys provide
14 different services?

15 CHAIRMAN RAYMOND: Yes.

16 DR. THORNQUIST: And can you refresh my
17 memory on specifically what that's related to?

18 CHAIRMAN RAYMOND: The -- so again, the
19 question for the folks on the phone was do these folks
20 provide different services than Shipman & Goodwin.
21 Shipman & Goodwin provides our sort logistics and Board-
22 related legal support and contract work. Updike Kelly
23 helps us with any litigation-related activities. And my
24 comment regarding not experiencing -- or expecting any is

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1 that all of our current litigation issues have been
2 resolved, fully resolved.

3 MS. BETTY JO PAKULIS: Did we bring them on
4 when we began the Axway negotiations or had they been part
5 of --

6 MS. KRAUS: They were brought from the
7 beginning is my understanding.

8 MS. PAKULIS: We've always had them.

9 DR. THORNQUIST: Yeah, they brought a
10 different skillset than Shipman & Goodwin that we felt we
11 needed at that time as well, as I recall.

12 MS. PAKULIS: Okay.

13 MR. CHUDWICK: Yeah, they were the primary
14 negotiators of the Axway contract at the very beginning
15 with Peter and the litigation side.

16 MS. PAKULIS: Okay, thank you.

17 CHAIRMAN RAYMOND: So the discussion here
18 was about the different skillsets that the two companies
19 brought to bear and that the Updike Kelly did the initial
20 negotiations on the Axway contract and provided litigation
21 support for that contract.

22 DR. THORNQUIST: Are they also then on an
23 as-needed basis?

24 CHAIRMAN RAYMOND: Yes, they are also on an

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1 as-needed basis.

2 DR. THORNQUIST: I'm speaking louder now so
3 they can hear.

4 CHAIRMAN RAYMOND: I would repeat anyway.
5 Okay, any other discussion of this matter? Alright, I
6 will put forth -- all in favor of extending our Updike,
7 Kelly & Spellacy contract for 12 months please signify
8 with an Aye.

9 VOICES: Aye.

10 CHAIRMAN RAYMOND: Any opposed? Alright,
11 the motion passes. Okay, thank you. The last item on
12 that's sort of listed under the agency business is a
13 discussion that I mentioned at our last meeting. Our
14 HITE/CT Board was requested to consider participating in a
15 pilot program related to Health Information Exchange
16 within the behavioral health industry and this was
17 requested from a constituent.

18 And so I wanted to provide the funding
19 opportunity for your consideration and have a discussion
20 about what the group's collective thoughts are on this
21 after at least at the top level considering the
22 application and I incredibly support and applaud the
23 efforts in the area. And my short-term view of this is
24 we're not well positioned to successfully deliver upon the

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1 terms of the award. There are some conditions associated
2 with ability to react in both technical and business
3 requirements in order to receive the award. And it was at
4 least my perspective that perhaps we were not well
5 positioned to spend our resources chasing this funding
6 opportunity.

7 Barbara, did you want to add?

8 MS. PARKS-WOLF: Also, the applications are
9 due on the 7th and there is a time issue.

10 CHAIRMAN RAYMOND: Okay. The question --

11 DR. THORNQUIST: Are we going to have the
12 ability to apply?

13 CHAIRMAN RAYMOND: -- so it was a short
14 turnaround and the applications were due on the 7th -- are
15 due on the 7th?

16 MS. PARKS-WOLF: I think so.

17 CHAIRMAN RAYMOND: Yeah. And they -- I
18 mean, they specifically kept it short because they were
19 looking for work to start almost immediately. Any other
20 thoughts on that specific opportunity? Okay, I will -- I
21 don't know that we need an official motion on it.

22 MR. CHUDWICK: Just no action taken.

23 CHAIRMAN RAYMOND: Yeah.

24 MR. CHUDWICK: The minutes can reflect

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1 that.

2 CHAIRMAN RAYMOND: Okay. So the minutes
3 will reflect that we didn't take any action on that. I
4 think this sort of fits -- I'll bring the item for the
5 conclusion and talk about other business. I'll move to
6 the next item on the agenda.

7 The thing that we've been talking about
8 related to long-term sustainability of HITE/CT, we have
9 had a couple of discussions to date about what's happening
10 in the marketplace and how the state -- you know, given
11 where we are should position itself to meet our ongoing
12 needs to help doctors -- to help facilitate the exchange
13 of information frankly. And we don't have any conclusions
14 at this time. I do believe that we have some short-term
15 commitments that will provide us perhaps some incremental
16 funding from the Department of Social Services and with
17 the Board's approval and direction we would begin to
18 pursue a short-term memorandum of understanding between
19 HITE/CT and the Department of Social Services for use and
20 support of the provider directory related to the Medicaid
21 population.

22 Commissioner Bremby, did you want to add
23 anything to that? I know you're in the car.

24 MR. BREMBY: Yes Mark, I just want to say

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1 that we have a very real interest in putting these
2 resources into service and we would look for MOU/MOA for a
3 short period of time with ITT in order to accommodate that
4 functionality. We believe that this will enable us to
5 kick-start our efforts towards meaningfully exchanging
6 data for Medicaid participants.

7 CHAIRMAN RAYMOND: Thank you. So in
8 relation to some short-term questions about intervening
9 period of time between the end of the grant period and for
10 some of these additional support contracts, we do believe
11 that we'll be able to secure again what amounts to a
12 shorter term funding source to allow some of these works
13 to continue. And when we use the shorter term, it's
14 really from planning purposes the remainder of the current
15 fiscal year which for the state runs through the end of
16 June.

17 That begs the question about broader -- you
18 know, longer term funding and ability to support the
19 program and continue to advance the program and the best I
20 can categorize this in continued discussions with the
21 administration is that there are the desire to continue to
22 see us gain value from the exchange of this information.
23 It means a critical component of our SIM grant program as
24 a part of reforming how we look at and pay for and track

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1 quality outcomes in the health care space. Having sort of
2 seen and heard that commitment several times from the
3 administration and from the Commissioners that are
4 represented in this group, we still don't have a concrete
5 plan to what that next step in organizational structure
6 should look like. But we do believe that without a
7 sustained revenue source, that a quasi-public to support
8 this function may not necessarily be the most sustainable
9 of organization structures.

10 So because I don't have anything more
11 definitive to share. I did want to collect the Board's
12 thoughts on where we currently are and if there were any -
13 - you know, as we are investigating all potential options
14 whether there is anything additional that you suggest that
15 I as the Chair or the staff should be looking into at this
16 time.

17 MS. ANDREWS: This is Ellen Andrews. I
18 guess I don't have a thought so much as questions. If I -
19 - and maybe this is something that can be done in writing
20 but just a short description of the work that's going to
21 be done for Medicaid and how it's going to be used and how
22 it fits into everything else that's happening in Medicaid.
23 And especially as well how HITE/CT is going to fit into -
24 - or how it sees itself within the SIM project.

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1 I know the administration is very
2 supportive of them. Advocates have had a lot of concerns
3 and are still waiting on answers to questions and how
4 things play out to see whether we're going to be
5 supporting the administration's applications for grant
6 funding. So I would really like to understand what
7 HITE/CT is thinking about in terms of a role in supporting
8 SIM.

9 CHAIRMAN RAYMOND: Okay. Ellen, have you
10 seen the -- I'm sure that you've seen the report.

11 MS. ANDREWS: Oh yes.

12 CHAIRMAN RAYMOND: You know, I believe that
13 --

14 MS. ANDREWS: All 255 pages, yes I have.

15 CHAIRMAN RAYMOND: -- the health
16 information section, you know, talks about what the role
17 is of some of the underlying technologies and support that
18 would be established. You know, whether it's associated
19 with the provider directory or other supporting efforts
20 like the all payer claims database the Access Health CT is
21 running and the need to collect additional analytics along
22 the way.

23 It's not clear exactly the role that HITE
24 will play in that, but I think from the discussion in the

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1 HIT section you'll get a flavor for what the expectations
2 are from a SIM grant perspective.

3 MS. ANDREWS: Right, and I guess my
4 questions then are around whether HITE/CT is going to have
5 some role in information sharing and then, you know,
6 privacy issues always where there's -- and then on the
7 other upside also will HITE/CT be -- you talk about
8 analytics. Will HITE/CT be a part of, you know, rate
9 adjustment and benchmark and those kinds of issues.

10 CHAIRMAN RAYMOND: Okay. Okay, I think
11 getting something written up on that topic would be
12 helpful for everyone, so. Any other discussion items?
13 Barbara.

14 MS. PARKS-WOLF: The APCD put out an RFP on
15 doing what they need to do, they need a provider directory
16 too. Is that a source of a customer or -- how is that
17 going to work out?

18 CHAIRMAN RAYMOND: For the folks on the
19 phone the question was that Access Health CT and the all
20 payer claims database has put out an RFP to have some of
21 these services made available to them and as a part of
22 that they require the use of a provider directory. And
23 the question was is that a source of a customer or a
24 professional funding associated with HITE/CT?

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1 I believe the answer to that is yes for
2 both, and I've had some preliminary discussions with
3 Access Health Connecticut and Timam Ahmed about what the
4 timeline is for the capability with HITE/CT so when we
5 would expect to have some of the capabilities available
6 and when they would expect to need them, to be able to use
7 them. So in general there's an alignment between when we
8 believed we would have capability available and when they
9 would need it, but we need to get into some more granular
10 discussions in regards to what exactly they need to have
11 stored in the directory. And if that's not available from
12 our current source of data providers, talk about
13 maintaining that and data quality of those as well.

14 But at this point we're in the preliminary
15 discussion stages about aligning the timeline with their
16 efforts.

17 MS. PARKS-WOLF: Thank you.

18 CHAIRMAN RAYMOND: Yup. Are there any
19 other discussion items related to our short-term plan or
20 any other thoughts relating to our longer term that we
21 should consider? If you do have any please feel free to
22 send them out to the group. We believe that it states to
23 be an active discussion over the next several months and
24 time is of the essence. So I invite any feedback that you

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1 have on that subject.

2 At this point I will open it up if there's
3 any other business that people have on the agenda or
4 people would like to discuss. Any other business? Seeing
5 none in the room, any other business on the phone? Okay -
6 -

7 MR. BREMBY: Not at this time.

8 CHAIRMAN RAYMOND: -- thank you. Yes,
9 Barbara.

10 MS. PARKS-WOLF: I just have a question. So
11 in March -- through the end of March our grant goes but we
12 will continue to meet as long as --

13 DR. THORNQUIST: Yeah, that's a good
14 question.

15 MS. PARKS-WOLF: -- as long as what, what
16 conditions us to keep meeting?

17 CHAIRMAN RAYMOND: So the question is our
18 grant runs till the middle of March and, you know, will we
19 continue to meet thereafter. And I believe that we have a
20 statutory requirement regardless of funding to attend to
21 the organization.

22 Our goal is to have, again within
23 relatively short order, options for what it is that we
24 will do in the future whether it's under the guise of this

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1 or that we consider and propose some other structures to
2 accomplish what it is that we have been legislatively been
3 told to do. So at least for the fiscal year if not for
4 the calendar year, we have posted the dates for the
5 meetings?

6 MS. KRAUS: We've done it for the entire
7 year.

8 CHAIRMAN RAYMOND: We've done it for the
9 entire year and so I would ask that you at least hold
10 those on the calendar at this time and if that changes you
11 all will be the first to know.

12 DR. THORNQUIST: So just as a practical
13 matter who covers his salary if we have no money?

14 CHAIRMAN RAYMOND: The question is who
15 covers the payments for our recording processes if we
16 don't have --

17 DR. THORNQUIST: Because that's required.

18 CHAIRMAN RAYMOND: -- it is.

19 DR. THORNQUIST: Yeah.

20 CHAIRMAN RAYMOND: Unknown at this time.
21 Any other discussion under agency business? Okay, for
22 those on the phone there's no one in -- well there's --
23 any public comment? Besides staff there's no general
24 public here so I would say that would bring that section

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1 of our agenda to a close.

2 MR. BREMBY: Are you looking for a motion
3 to adjourn?

4 CHAIRMAN RAYMOND: Yes I am. Do I hear a
5 motion to adjourn?

6 DR. THORNQUIST: So moved.

7 CHAIRMAN RAYMOND: Okay, do I hear a
8 second?

9 MS. ANDREWS: Second.

10 CHAIRMAN RAYMOND: Thank you, all in favor
11 of adjournment signify with an Aye.

12 VOICES: Aye.

13 CHAIRMAN RAYMOND: Any opposed? So moved,
14 thank you all.

15 (Whereupon, the meeting was adjourned at
16 5:20 p.m.)